

**Political Organization  
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

**A For the period beginning** 10/16/2014 **and ending** 11/24/2014

**B Check applicable box:** ☒ Initial report ☐ Change of address ☐ Amended report ☐ Final report

**1 Name of organization** Last Chance for Patient Choice **Employer identification number** 05 - 0628214

**2 Mailing address (P.O. box or number, street, and room or suite number)**  
P.O.Box 2817

**City or town, state, and ZIP code**  
Waterloo, IA 50704

**3 E-mail address of organization:** Eric.Brodahl@vgm.com **4 Date organization was formed:** 10/17/2005

**5a Name of custodian of records** Michael Mallaro **5b Custodian's address** PO Box 2817  
Waterloo, IA 50704 -

**6a Name of contact person** John Gallagher **6b Contact person's address** PO Box 2817  
Waterloo, IA 50704 -

**7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number**  
1111 W. San Marnan Dr.

**City or town, state, and ZIP code**  
Waterloo, IA 50704 -

**8 Type of report (check only one box)**

- |   |   |
|---|---|
| <input type="checkbox"/> First quarterly report<br>(due by April 15)                | <input type="checkbox"/> Monthly report for the month of:<br>(due by the 20th day following the month shown above, except the<br>December report, which is due by January 31) |
| <input type="checkbox"/> Second quarterly report<br>(due by July 15)                | <input type="checkbox"/> Pre-election report (due by the 12th or 15th day before the election)  |
| <input type="checkbox"/> Third quarterly report<br>(due by October 15)              | (1) Type of election:   |
| <input type="checkbox"/> Year-end report<br>(due by January 31)                     | (2) Date of election:   |
| <input type="checkbox"/> Mid-year report (Non-election<br>year only-due by July 31) | (3) For the state of:   |
|   | <input checked="" type="checkbox"/> Post-general election report (due by the 30th day after general election)   |
|   | (1) Date of election: 11/04/2014  |
|   | (2) For the state of: IA  |

**9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 0**

**10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 113**

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Mike Mallaro

12/02/2014

**Sign  
Here**



Signature of authorized official



Date

<b>Schedule A</b>	<b>Itemized Contributions</b>	Schedule A
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Schedule BItemized Expenditures		Schedule B
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of Expenditure
US Bank	N/A	\$ 113
PO Box 1800	Recipients's occupation	Date of expenditure
St. Paul, MN 55101	N/A	11/17/2014
Purpose of expenditure		
Bank Fees		